

***PROPOSED* FORMAT and FILE SPECIFICATIONS
for
MIRCaI ONLINE TRANSMISSION
EMERGENCY DEPARTMENT & AMBULATORY SURGERY DATA**

APRIL 2004



Medical Information Reporting for California

State of California
Office of Statewide Health Planning and Development (OSHPD)
Patient Data Section
818 K Street, Room 100
Sacramento, CA 95814
(916) 323-7679

ED and AS STANDARD FORMAT AND SPECIFICATIONS FOR ONLINE TRANSMISSION

MINIMUM PC CONFIGURATION

1. Access to a personal computer (with the following minimum configuration)
 - 300MHz processor, 64 MB RAM, 4 GB hard drive (at least 500MB free)
 - High speed Internet connection (preferred) or 56k modem or faster
 - Microsoft Internet Explorer version 5.0 (or higher) with 128-bit Secure Socket Layer (SSL)
 - Adobe Acrobat Reader version 4.0 (or higher)
 - Virus Checking Software
 - File Compression Program. MIRCAl accepts files that are 3MB or less. Data files over 3MB must be compressed in order to be accepted by MIRCAl.
 - Optional CD-ROM
2. Internet access (ISP)
3. E-mail

STANDARD RECORD FORMAT

Deviation from the format will not be accepted.

- One reporting facility and report period per file.
- Standard ASCII character coding.
- Record length 382 characters followed by a carriage return and line feed.
- All fields are left-justified and padded with spaces on the right.

ADDITIONAL requirements

- No packed or binary data.
- No Null Values
- The data file must be a text file with the extension of ".txt" (if zipped, submit the zipped file with a ".zip" extension).

FILE COMPRESSION

Data files may be compressed (zipped) to speed up the file uploading time. The following compression applications are supported and can be obtained from the manufacturer's website:

- gzip
- Pkzip
- Winzip

**ED and AS STANDARD FORMAT AND SPECIFICATIONS
FOR ONLINE TRANSMISSION**

Standard Record Format

<u>Data Element</u>	<u>From</u>	<u>Through</u>	<u>Format/Field Length</u>¹
Facility Identification Number	1	6	N (6)
Abstract Record Number (Optional)	7	18	X (12)
Patient's Social Security Number	19	27	N (9)
ZIP Code	28	32	X (5)
Date of Birth	33	40	N (8)
Sex	41	41	A (1)
Race	42	43	X (2)
Ethnicity	44	45	X (2)
Service Date	46	53	N (8)
Disposition of Patient	54	55	X (2)
Expected Source of Payment	56	57	X (2)
Principal Diagnosis	58	64	X (7)
Other Diagnoses	65	232	X (7) ²
Principal E-Code	233	239	X (7) ³
Other E-Codes	240	267	X (7)
Principal Procedure	268	272	X (5) ⁴
Other Procedures	273	372	X (5)
National Provider Identifier No.	373	382	N (10)

Footnotes are on Page 3

ED and AS STANDARD FORMAT AND SPECIFICATIONS FOR ONLINE TRANSMISSION

FOOTNOTES

¹Format indicates data type and length (in parentheses). Data type is defined as:

A = Alpha

N = Numeric

X = Alphanumeric

²This variable and its format occur 24 times. Fill from the left-most position and **DO NOT** skip fields.

³This variable and its format occur 4 times. Fill from the left-most position and **DO NOT** skip fields.

⁴This variable and its format occur 20 times. Fill from the left-most position and **DO NOT** skip fields.

ED and AS STANDARD FORMAT AND SPECIFICATIONS FOR ONLINE TRANSMISSION

FACILITY IDENTIFICATION NUMBER

Record Positions:	1 through 6
Data Length:	6
Data Type:	Numeric
Codes:	Facility Identification Number (the unique facility number assigned by OSHPD). This field is required for each record.

ABSTRACT RECORD NUMBER (OPTIONAL)

Record Positions:	7 through 18
Data Length:	12
Data Type:	Alphanumeric
Codes:	If not reported, the default value is all spaces.

PATIENT'S SOCIAL SECURITY NUMBER

Record Positions:	19 through 27
Data Length:	9
Data Type:	Numeric
Codes:	Enter the full 9-digit SSN including zeros. DO NOT use hyphens. Enter 000000001 (Unknown) if the SSN is not recorded in the patient's medical record.

ZIP CODE

Record Positions:	28 through 32
Data Length:	5
Data Type:	Alphanumeric
Codes:	5 digit ZIP Code 99999 Unknown

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FOR ONLINE TRANSMISSION**

DATE OF BIRTH

Record Positions:	33 through 40
Data Length:	8
Data Type:	Numeric
Codes:	<u>9999</u> <u>99</u> <u>99</u> Year Month Day

Special Instructions: Single-digit months and days must include a preceding zero.
The transmittal process will populate the database field by moving the first 4 digits to the end of the field.
EXAMPLE: Field in File equals 20040301.
Database value will contain 03012004. The database value represents the date format mmddccyy.

SEX

Record Position:	41
Data Length:	1
Data Type:	Alpha
Codes:	M Male F Female U Unknown

**ED and AS STANDARD FORMAT AND SPECIFICATIONS
FOR ONLINE TRANSMISSION**

RACE

Record Positions:	42 through 43
Data Length:	2
Data Type:	Alphanumeric
Codes:	R1 American Indian or Alaska Native R2 Asian R3 Black or African American R4 Native Hawaiian or Other Pacific Islander R5 White R9 Other Race 99 Unknown

ETHNICITY

Record Positions:	44 through 45
Data Length:	2
Data Type:	Alphanumeric
Codes:	E1 Hispanic or Latino E2 Non-Hispanic or Non-Latino 99 Unknown

ED and AS STANDARD FORMAT AND SPECIFICATIONS FOR ONLINE TRANSMISSION

SERVICE DATE

Record Positions: 46 through 53

Data Length: 8

Data Type: Numeric

Codes: 9999 99 99
Year Month Day

Special Instructions: Single-digit months and days must include a preceding zero.

The transmittal process will populate the database field by moving the first 4 digits to the end of the field.

EXAMPLE: Field in File equals 20040301.

Database value will contain 03012004. The database value represents the date format mmddccyy.

ED and AS STANDARD FORMAT AND SPECIFICATIONS FOR ONLINE TRANSMISSION

DISPOSITION OF PATIENT

Record Positions:	54 through 55																																				
Data Length:	2																																				
Data Type:	Alphanumeric																																				
Codes:	<table><tr><td>01</td><td>Discharged to home or self care (routine discharge)</td></tr><tr><td>02</td><td>Discharged/Transferred to short term general hospital for inpatient care</td></tr><tr><td>03</td><td>Discharged/Transferred to skilled nursing facility (SNF)</td></tr><tr><td>04</td><td>Discharged/Transferred to an intermediate care facility (ICF)</td></tr><tr><td>05</td><td>Discharged/Transferred to non-Medicare PPS children's hospital or non-Medicare PPS cancer hospital for inpatient care</td></tr><tr><td>06</td><td>Discharged/Transferred to home under care of organized home health service organization</td></tr><tr><td>07</td><td>Left against medical advice or discontinued care</td></tr><tr><td>08</td><td>Discharged/Transferred to home under care of a Home Intravenous (IV) provider</td></tr><tr><td>20</td><td>Expired</td></tr><tr><td>43</td><td>Discharged/Transferred to a federal health care facility</td></tr><tr><td>50</td><td>Discharged home with hospice care</td></tr><tr><td>51</td><td>Discharged to a medical facility with hospice care</td></tr><tr><td>61</td><td>Discharged/Transferred to a hospital-based Medicare approved swing bed</td></tr><tr><td>62</td><td>Discharged/Transferred to another rehabilitation facility including rehabilitation distinct part unit of a hospital</td></tr><tr><td>63</td><td>Discharged/Transferred to a long term care hospital</td></tr><tr><td>64</td><td>Discharged/Transferred to a nursing facility certified under Medicaid (Medi-Cal), but not certified under Medicare</td></tr><tr><td>65</td><td>Discharged/Transferred to a psychiatric hospital or psychiatric distinct part unit of a hospital</td></tr><tr><td>00</td><td>Other</td></tr></table>	01	Discharged to home or self care (routine discharge)	02	Discharged/Transferred to short term general hospital for inpatient care	03	Discharged/Transferred to skilled nursing facility (SNF)	04	Discharged/Transferred to an intermediate care facility (ICF)	05	Discharged/Transferred to non-Medicare PPS children's hospital or non-Medicare PPS cancer hospital for inpatient care	06	Discharged/Transferred to home under care of organized home health service organization	07	Left against medical advice or discontinued care	08	Discharged/Transferred to home under care of a Home Intravenous (IV) provider	20	Expired	43	Discharged/Transferred to a federal health care facility	50	Discharged home with hospice care	51	Discharged to a medical facility with hospice care	61	Discharged/Transferred to a hospital-based Medicare approved swing bed	62	Discharged/Transferred to another rehabilitation facility including rehabilitation distinct part unit of a hospital	63	Discharged/Transferred to a long term care hospital	64	Discharged/Transferred to a nursing facility certified under Medicaid (Medi-Cal), but not certified under Medicare	65	Discharged/Transferred to a psychiatric hospital or psychiatric distinct part unit of a hospital	00	Other
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FOR ONLINE TRANSMISSION**

EXPECTED SOURCE OF PAYMENT

Record Positions:	56 through 57
Data Length:	2
Data Type:	Alphanumeric
Codes:	09 Self Pay
	11 Other Non-federal programs
	12 Preferred Provider Organization (PPO)
	13 Point of Service (POS)
	14 Exclusive Provider Organization (EPO)
	16 Health Maintenance Organization (HMO)
	Medicare Risk
	AM Automobile Medical
	BL Blue Cross/Blue Shield
	CH CHAMPUS (TRICARE)
	CI Commercial Insurance Company
	DS Disability
	HM Health Maintenance Organization
	MA Medicare Part A
	MB Medicare Part B
	MC Medicaid (Medi-Cal)
	OF Other federal program
	TV Title V
	VA Veteran's Affairs Plan
	WC Workers' Compensation Health Claim
	00 Other

ED and AS STANDARD FORMAT AND SPECIFICATIONS FOR ONLINE TRANSMISSION

PRINCIPAL DIAGNOSIS

Record Positions:	58 through 64
Data Length:	7
Data Type:	Alphanumeric
Codes:	International Classification of Diseases, 9 th Revision, Clinical Modification
Special Instructions:	The default value is all spaces.

OTHER DIAGNOSES

Record Positions:	65 through 71; 72-78; 79-85; 86-92; 93-99; 100-106; 107-113; 114-120; 121-127; 128-134; 135-141; 142-148; 149-155; 156-162; 163-169; 170-176; 177-183; 184-190; 191-197; 198-204; 205-211; 212-218; 219-225; and 226-232.
Data Length:	7
Data Type:	Alphanumeric
Codes:	International Classification of Diseases, 9 th Revision, Clinical Modification
Special Instructions:	Fill from the left-most position and DO NOT skip fields. The default value is all spaces. Do not include E-codes or M-codes.

PRINCIPAL E-CODE

Record Positions:	233 through 239
Data Length:	7
Data Type:	Alphanumeric
Codes:	International Classification of Diseases, 9 th Revision, Clinical Modification
Special Instructions:	The default value is all spaces.

ED and AS STANDARD FORMAT AND SPECIFICATIONS FOR ONLINE TRANSMISSION

OTHER E-CODE

Record Positions:	240 through 246; 247-253; 254-260; and 261-267.
Data Length:	7
Data Type:	Alphanumeric
Codes:	International Classification of Diseases, 9 th Revision, Clinical Modification
Special Instructions:	Fill from the left-most position and DO NOT skip fields. The default value is all spaces.

PRINCIPAL PROCEDURE

Record Positions:	268 through 272.
Data Length:	5
Data Type:	Alphanumeric
Codes:	Current Procedural Terminology – Fourth Edition (CPT-4)
Special Instructions:	The default value is all spaces.

OTHER PROCEDURES

Record Positions:	273 through 277; 278-282; 283-287; 288-292; 293-297; 298-302; 303-307; 308-312; 313-317; 318-322; 323-327; 328-332; 333-337; 338-342; 343-347; 348-352; 353-357; 358-362; 363-367; and 368-372.
Data Length:	5
Data Type:	Alphanumeric
Codes:	Current Procedural Terminology – Fourth Edition (CPT-4)
Special Instructions:	Fill from the left-most position and DO NOT skip fields. The default value is all spaces.

**ED and AS STANDARD FORMAT AND SPECIFICATIONS
FOR ONLINE TRANSMISSION**

NATIONAL PROVIDER IDENTIFIER NUMBER

Record Positions:	373 through 382.
Data Length:	10
Data Type:	Numeric
Codes:	Assigned from the National Provider System (NPS)
Special Instructions:	<p>This is a placeholder until facilities are required to report their National Provider Identification numbers. Facilities may begin reporting their NPI beginning with encounters on and after May 23, 2005.</p> <p>This value will be populated with spaces by the submitters. There are no values to be entered into the database.</p>